

27-Jun-11

Preliminary Report of Accident

U.S. Department of Labor
Mine Safety and Health Administration

1. Accident Type: Fatal Injury		2. Accident Classification Fall of Face, Rib, Pillar or Highwall		3. Date/Time of Accident 06/27/2011 01:50 AM		4. Date/Time of Death 06/27/2011 01:50 AM		5. Fatal Case No 8						
6. Mine Information :														
a) Mining Company Name Rhino Eastern LLC			b) Mine Name Eagle #1			c) Parent of Mining Company Rhino Resource Partners LP								
7. Mine Location :		a) City Bolt		b) County Raleigh		c) State WV		8. Mine ID Number: 46-08758		9. Union: NO				
10. Primary Mineral Mined: BITUMINOUS			11. Number of Mine Employees:		a) Total 95		b) Underground 88		c) Open Pit/Quarry		d) Mill/Prep Plant		e) Other 7	
12. Contractor Name:						13. Union		14. Contractor ID Number:						
15. Contractor Address:		a) City		b) County		c) State		d) Zip Code						
16. Number of Contractor Employees:		a) Total		b) Underground		c) Open Pit/Quarry		d) Mill/Prep Plant		e) Other				
17. Number of Persons in Mine at Time of Accident:						18. Number of Persons Unaccounted For:								
a) Mine Employees: 18			b) Contractor Employees:			a) Mine Employees:			b) Contractor Employees:					
19) Location of Accident										20. Mining Height:				
<input checked="" type="checkbox"/> 01-Underground		<input type="checkbox"/> 03-Open Pit		<input checked="" type="checkbox"/> 07-Advance Mining		<input type="checkbox"/> 30-Mill/Prep Plant		<input type="checkbox"/> Other (specify)		Feet		Inches		
<input type="checkbox"/> 02-Surface at Underground		<input type="checkbox"/> 06-Dredge Mining		<input type="checkbox"/> 08-Retreat Mining		<input type="checkbox"/> 99-Office Facility				9		7		
21. Nonfatal Injuries: 0			22. Fatal Injuries: 1											
23. Victim Information :		a) Name Joseph Cassell		b) Age 33										
c) Regular Job Title: Crew Leader		d) Activity at Time of Accident: Cleaning rib to install support		<input checked="" type="checkbox"/> Mine Employee										
24. Experience :		Years Weeks Days		Years Weeks Days		Years Weeks Days		Years Weeks Days						
a) Total:		1 16 2		b) at the mine:		1 16 2		c) at activity (23d)		0 10 2		d) with Contractor		
25. Autopsy Performed: If Yes, Location YES Charleston, WV						26. Mine Telephone No.: (304) 682-0644								

27. Description of Accident (include equipment involved, the exact location in the mine, and status of rescue and recovery operations):

On June 27, 2011, at approximately 1:50 a.m., Joseph Cassell, crew leader, received fatal crushing injuries from a coal and rock brow. The victim was in the process of cleaning the mine floor to install timbers when the brow fell from the top of the rib. The brow measured approximately 100" long, by 32" thick, by 37" tall. The accident occurred just outby the active section. An accident investigation was immediately initiated and is ongoing at this time.

The information provided in this notice is based on preliminary data ONLY and does not represent final determinations regarding the nature of the incident or conclusions regarding the cause of the accident.

28. Equipment Manufacturer:				29. Model:			
30. District: C0400 Mt. Hope		32. Field Office: Mt. Hope WV				33. Event Number: 6287995	
34. Accident Investigator: William Bane		35. MSHA Person Notified: Charles E. Carpenter		Date 06/27/2011		Time 02:04 A	
36. Type of Report: Initial		37. Name of Preparer and Date Prepared: William Bane				Date 06/27/2011	
38. Reason For Amendment:							